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7           **UNITED STATES DISTRICT COURT**  
8           **WESTERN DISTRICT OF WASHINGTON**  
9           **AT SEATTLE**

10           STATE OF WASHINGTON, et al.,

11                         Plaintiffs,

12                         NO.

13                         DECLARATION OF M.B.

14                         v.

15           DONALD J. TRUMP, in his official  
16           capacity as President of the United States of  
17           America, et al.,

18                         Defendants.

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          DECLARATION OF M.B.

ATTORNEY GENERAL OF WASHINGTON  
Complex Litigation Division  
800 Fifth Avenue, Suite 2000  
Seattle, WA 98104  
(206) 464-7744

1 I, M.B., declare as follows:

2 1. I am over the age of 18, competent to testify as to the matters herein, and make  
3 this declaration based on my personal knowledge.

4 2. I am the parent of W.B., who is 20 years old. We live in Pierce County,  
5 Washington. I am choosing to proceed using my initials, and refer to W.B. by their initials,  
6 because of fear of being identified and targeted by the Federal Government. We are also afraid  
7 of being targeted by anti-trans individuals in the community. From both sides, we are concerned  
8 about our physical, mental, and emotional safety.

9 3. W.B. is transgender and nonbinary. Being nonbinary means that W.B. does not  
10 identify with any binary gender, including the sex they were assigned at birth. In W.B.'s case,  
11 being transgender means that they have socially and medically transitioned to achieve a gender  
12 presentation that matches their nonbinary experience of gender. W.B. uses they/them pronouns.

13 4. W.B. came out as transgender and nonbinary at age 14. This was five years before  
14 they were able to identify and describe their sexuality and sexual orientation. Even at age 14,  
15 W.B. had been aware of gender-diverse identities for some time, and often talked about the  
16 concept.

17 5. At age 14, W.B. suffered from depression and anxiety. At the point when W.B.  
18 first expressed their transgender identity, they began to exhibit symptoms of gender dysphoria,  
19 which is a mismatch between an individual's outward appearance and their internal experience  
20 of gender. Gender dysphoria worsened W.B.'s depression and anxiety, and they became suicidal.

21 6. W.B. obtained intensive outpatient mental health treatment to address suicidal  
22 ideation. Through that process, they began to conceive of the gender-affirming care that would  
23 help them stay healthy physically, mentally, and emotionally.

24 7. W.B. has always displayed a remarkable level of practicality and self-awareness  
25 where gender identity is concerned. For example, though W.B. identified by age 14 that they  
26 wanted top surgery to remove breast tissue, they knew at that time that they were not ready for

1       the surgery. They opted to wait until age 17 to plan the surgery, despite worsening symptoms of  
2       gender dysphoria based on having breasts.

3           8.       At that time, our family lived in Texas. Just when W.B. determined that they were  
4       ready for top surgery, the state of Texas banned the procedure for all patients younger than 18.  
5       That action, and a combination of other circumstances, forced us to reschedule the surgery  
6       multiple times.

7           9.       W.B. finally underwent top surgery in 2022 at age 18. The positive effect of the  
8       surgery on W.B.'s mental health and daily functioning has been dramatic.

9           10.      Previously, the sight of W.B.'s naked body caused them such distress, such acute  
10       gender dysphoria, that they were able to shower only very infrequently. On days when they did  
11       manage to shower, the act took all the energy out of them, leaving them unable to manage other  
12       normal activity. Similarly, our family was once forced to cover all mirrors in the home, because  
13       W.B. could not look at themself without feeling emotionally destroyed.

14          11.      After top surgery, W.B. showers normally and takes care of themself. In addition,  
15       though the idea of being photographed once caused W.B. severe anxiety, post-surgery they will  
16       now allow photos to be taken of them. We never understood where W.B.'s resistance to being  
17       photographed came from, but now we understand better that it was distress associated with  
18       gender dysphoria.

19          12.      I believe that with greater awareness and representation in the media, W.B. could  
20       have accessed puberty blockers before age 14, possibly eliminating the need for top surgery.  
21       Still, top surgery was the solution that made sense for W.B. when they were ready. W.B. takes  
22       birth control to suppress menstruation, but they still experience gender dysphoria from  
23       occasional breakthrough bleeding. At some point, bottom surgery (like a hysterectomy) may be  
24       something they choose for themself. Unlike many transgender patients, W.B. does not currently  
25       want hormone replacement therapy. W.B.'s experience demonstrates that transgender and  
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1 gender-diverse individuals have diverse needs where gender-affirming healthcare is concerned  
2 and is not a one-size-fits-all situation.

3       13. Societal resistance and hostility towards transgender and other gender-diverse  
4 people continues to have a major impact on W.B. When our family lived in Texas, W.B. suffered  
5 greatly from fear that they would be physically attacked based on their appearance. W.B.'s fear  
6 gave rise to paranoia—the sense that malicious people were coming after them, or that they  
7 would be taken away from their family. It was so severe that W.B. had problems leaving the  
8 house.

9       14. Texas policy and the climate around gender-affirming care eroded W.B.'s ability  
10 to trust even their own therapist. In one session, the therapist probed whether W.B. was taking  
11 cross-sex hormones; the implication was if W.B. had been taking hormones, the therapist would  
12 be mandated to report our family in order to avoid liability. As stated above W.B. was not, and  
13 has not, taken cross-sex hormones. It is unfair and unjust to W.B. that suspicion of and  
14 discrimination against gender-diverse people deprived them of trusted relationships with medical  
15 and mental health providers.

16       15. In October 2023, our family moved from Texas to Washington State. The move  
17 involved considerable financial loss for us. We had only recently made major improvements on  
18 our home, and I was forced to cash out my IRA in order to pay for those improvements to  
19 maintain our home's resale value. We did not want to leave Texas. But the move was essential  
20 to keeping W.B. safe and healthy.

21       16. The climate in Washington is much more supportive of gender-diverse people,  
22 evidenced by signs of support for LGBTQ+ people in public places. The benefits of  
23 gender-affirming care and a supportive environment cannot be overstated. For W.B., the  
24 difference is like night and day.

25       17. I understand that the President of the United States has issued an Executive Order  
26 affecting and preventing gender-affirming care for people under age 19. The Federal

1 Government's policy will have a variety of impacts on W.B. and countless other gender-diverse  
2 people. The Executive Order limits options for gender-affirming care—including for many legal  
3 adults. The Executive Order and the Federal Government's toxic rhetoric also fuel hostility  
4 toward gender-diverse people like W.B., wherever those people live. W.B. is aware of the threats  
5 they face as a trans and nonbinary person. This reality exacerbates the separation anxiety,  
6 agoraphobia, and PTSD that W.B. lives with. As a parent, this is heartbreakingly difficult.

7        18. I believe W.B. would show greater progress in their mental health treatment in a  
8 climate that was less hostile to them based simply on their gender identity. W.B. is an incredibly  
9 smart, perceptive person. They like playing video games, and fantasy, horror, and science fiction  
10 movies and books, which is something we get to enjoy together. They are working on their GED,  
11 and dream of one day obtaining a PhD and working in a scientific field. Instead, they are forced  
12 to spend their energy worrying about an end to gender-affirming care, or federal actions to end  
13 recognition of nonbinary gender markers on official government documents. Forcing my child  
14 to permanently accept a gender identity that does not match their lived experience is cruel, and  
15 would ensure a lifetime of painful gender dysphoria for W.B.

16        19. Our family does not want to leave the United States. The U.S. is our home, and  
17 we want to stay and fight for ourselves and our child. Though we want to fight, we are not able  
18 to personally take on the Federal Government or challenge the Executive Order ourselves. We  
19 cannot place ourselves or W.B. directly in the spotlight in that way. We also do not have the  
20 required energy—what energy we have is devoted to taking care of our family.

I declare under penalty of perjury under the laws of the State of Washington and the  
United States of America that the foregoing is true and correct.

23 DATED this 3rd day of February 2025.

M.B.